

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23914

7590

03/09/2006

LOUIS J. WILLE  
 BRISTOL-MYERS SQUIBB COMPANY  
 PATENT DEPARTMENT  
 P O BOX 4000  
 PRINCETON, NJ 08543-4000

06/02/2006 MGBREH2 00000033 193880 09988971

01 FC:1501 1400.00 DA  
 02 FC:1504 300.00 DA  
 03 FC:8001 30.00 DA

09/08/97  
 11/20/2001

FILING DATE

FIRST NAMED INVENTOR

Han Chang

ATTORNEY DOCKET NO.

D0043 NP

CONFIRMATION NO.

9658

TITLE OF INVENTION: CLONING AND EXPRESSION OF HUMAN SLAP-2: A NOVEL SH2/SH3 DOMAIN-CONTAINING HUMAN SLAP  
 HOMOLOGUE HAVING IMMUNE CELL-SPECIFIC EXPRESSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/09/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
BELYAVSKIY, MICHAEL A	1644	424-144100			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Stephen C. D'Amico

2 Christopher A. Klein

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Bristol-Myers Squibb Company

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)  
 Princeton, New Jersey USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, in Deposit Account Number 19-3880 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Stephen C. D'Amico

Date 6-2-06

Registration No. 46,652

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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JUN. 2. 2006 11:00AM

BMS PATENT DEPT

- - - - -NO. 3979---P. 1/4\_ \_ \_ \_



**Bristol-Myers Squibb Company**

Worldwide Medicines Group  
P.O. Box 4000 Princeton, NJ 08543-4000

DATE: June 2, 2006

**FACSIMILE TRANSMITTAL COVER SHEET**

**URGENT**

TO: Issue Fee Branch  
FAX: 1-571-273-2885  
# OF PAGES: 4 (INCLUDING FAX TRANSMITTAL SHEET)  
FROM: Stephen C. D'Amico  
FAX #: (609) 252-4526  
PHONE #: (609) 252-5289  
RE: U.S. Appln. Serial No.: 09/988,971  
Attorney Docket No. D0043 NP

**CERTIFICATE OF TRANSMISSION VIA FACSIMILE**

I hereby certify that this correspondence 1) Issue Fee Transmittal (2 pages) and 2) "Fee Address" Indication Form (1 page) is being transmitted to the Patent and Trademark Office fax number 1-571-273-2885 on June 2, 2006.

  
Stephen C. D'Amico, Depositor

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